

U.S. DEPARTMENT OF COMMERCE PATENT & TRADEMARK OFFICE

Attorney's Docket Number Transmittal Letter to the United States B/O, Form PTO-1390 Designated/Elected Office (DO/EO/US) BEHN3001/FJD Concerning a Filing Under 35 USC 371 U.S. Application Number (if known International Application Number International Filing Date Priority Date Claimed 06/Oct/04 PCT/EP2004/011142 14/Nov/03 Title of Invention Closure cap for the filler neck of a reservoir and filler neck therefor Applicant(s) for DO/EO/US Kazem Behnamrad and Robert Rauleder Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items under 35 USC 371: 1. × This is a FIRST submission of items concerning a filing under 35 USC 371. 2. This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 USC 371. This express request to begin national examination procedures (35 USC 371(f)) at any time rather than delay 3. × examination until the expiration of the applicable time limit set in 35 USC 371(b) and PCT Articles 22 and 39(1). 4. The U.S. has been elected (Article 31). 5. × A copy of the International Application as filed 35 USC 371(c)(2). is transmitted herewith (required only if not transmitted by the International Bureau). a. Ø has been transmitted by the International Bureau. ¹ b. is not required, as the application was filed in the United States Receiving Office (RO/US). , c. A translation of the International Application into English (35 USC 371(c)(2)). 6. Amendments to the claims of the International Application under PCT Article 19 (35 USC 371(c)(3)) 7. × are transmitted herewith (required only if not transmitted by the International Bureau). a. have been transmitted by the International Bureau. b. c. \Box have not been made; however, the time limit for making such amendments has NOT expired. have not been made and will not be made. А. A translation of the amendments to the claims under PCT Article 19 (35 USC 371(c)(3)). 8. 9. An oath or declaration of the inventor(s) (35 USC 371(c)(4)). \Box Executed 10. A translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 USC 371(c)(5)). Items 11 to 16 below concern other document(s) or information included: 11. An Information Disclosure Statement under 37 CFR 1.97 and 1.98. 12. An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included. 13. A preliminary amendment. 14. Ø An Application Data Sheet under 37 CFR 1.76. 15. A substitute specification. 16. A change of power of attorney and/or address letter. 17. × Priority is claimed for German application no. 203 18 043.7 with a filing date of 14 Nov. 2003. A second copy of the published international application under 35 U.S.C. 154(d)(4). 18. 19. A second copy of the English translation of the international application under 35 U.S.C. 154(d)(4) 20. × Other items or information: a copy of the International Application WO 2005/049359 A2

Application Number (if Known) 10/577/132		International Application Number PCT/EP2004/011142			Attorney's Docket Number BEHN3001/FJD	
21. The following fee a) Basic national fee b) Examination fee					\$500.00	
33(1)-(4)	PEA/US indicated in the control of t	has been paid ching Authori ared by an ISA dicated to the	on the international ty	f PCT Article	\$400.00	
\$250 for each additional 50 sheets of paper or fractions thereof. Number of each additional 50 or fractions thereof (round up to a whole number) RATE						
- 100 =	/50=	· · · ·		x \$250.00		
Surcharge of \$130.00 the earliest claimed pr				30 months from		
CLAIMS	Number		NUMBER EXTRA	RATE		
Fotal Claims	18	-20 =		× \$50.00		
ndependent Claims	1	-3 =		× \$200.00		
Multiple Dependent Claims (if applicable) + \$360.				+ \$360.00	-	
TOTAL OF ABOVE CALCULATIONS						
	½ for filing by uant to 37 CFR		if applicable. Smal application.	l Entity Status is		
SUBTOTAL						
Processing fee of \$130 from the earliest claim				nan 30 months		
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Fee for recording the er accompanied by an app						
TOTAL FEES ENCLOSED					\$ 900.00	
				Amount to be:	Refunded:	
	•			Amount to be.	Charged:	

a. ⊠ A check in the amount of \$ 900

_ to cover the fees is enclosed.

b. \square Please charge my **Deposit Account Number 02-0200** in the amount of _\$ ______ to cover the above fees. A duplicate copy of this sheet is enclosed.

c.

The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to **Deposit Account Number 02-0200**. A duplicate copy of this sheet is enclosed.

Note: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.

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Customer Number Phone: (703) 683-0500

DATE: April 27, 2006

Respectfully submitted,

Felix D. D. Ambiosio
Attorney for Applicant
Registration Number: 25,721